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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name	e)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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SECRETARY OF STATE

K. SALY AUG 24 2018

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: George's Daint I	ited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Change	ge and fee(s) are submitted for filing.
Please return all correspondence concerning this matter	to the following:
George S Name of Person	(a)
Hip tocket Del Firm/Company	<u>0</u>
429 Belle Chasse	way
Pensacola, FC 325 City/Spate and Zip Code	06
George a hip pocket c E-mail address: (to be used for future annual repor	eli. COM i notification)
For further information concerning this matter, please ca	dl:
George S MakriS at (S	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:	
\$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

rioriaa	
I. Na	me of the limited liability company: George's Dainty Del LLC
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (b) 427 Belle Chasse Wo Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Pensacola, Fl 32506 Pensacola, Fl 32506
	$\frac{1}{2} \frac{1}{2} \frac{1}$
3.	Date of filing/registration in Florida 4. Document number
5. (a)	Lega 1200 United States Corporation Agents, Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
	13302 Winding Oak Court Registered Office Address MUST BE FLORID STREET ADDRESS)
	Tampa, FL 33612
	,FL
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:
	429 Belle Chasse Way NEW Registered Office Address:
	Pensacola, Fl 32500
the cha agent v was/we	mited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after nge or changes are made, the Florida street address of the registered office and the business office of the registered vill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) are authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in cles of organization or the operating agreement of the limited liability company.
- Sumai	ure of a member of authopical representative of a member Ocolog Orinted or typed name of signee
l herel provisi the obl to mere	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept igations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed a charge in the registered office address, I hereby confirm that the limited liability company has been I in writing of this change.
Signatu	re of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00